



Sheraton Crescent Hotel Phoenix Reservation Form
Collegiate Dairy Products Evaluation Contest
October 25-27, 2002
Sheraton Crescent Hotel Phoenix
Phoenix, Arizona

Note: A first night's hotel deposit may be made with this form or you may call the hotel directly at 1-800-423- 4126 or central reservations at 1-800-325-3535. Be sure to reference the Collegiate Contest if you call. In the event of cancellation, the first night's deposit will be refunded if the Sheraton Crescent is notified 48 hours prior to 6:00 p.m. of arrival and a cancellation number is obtained. **Please print.**

Name _____

Company _____

Address _____

City _____ State/Province _____ Zip/PC _____

Phone _____ Fax _____

E-Mail _____

Hotel Deposit Information:

☐ Standard Guest Room \$79.00

_____ Number (#) of rooms requested

☐ Non-Smoking _____ # of rooms ☐ Smoking _____ # of rooms

_____ # Of guests/room (maximum of 4, \$10/additional person/room)

Any Specifications: _____

Arrival Date: _____ Departure Date: _____
(Check-In 3:00 p.m.) (Check-Out 12:00 Noon)

I wish to pay my hotel deposit of \$79.00 by:

Name of Cardholder: _____

☐ VISA ☐ MasterCard ☐ American Express

Credit Card Number _____ Exp. Date _____

Signature _____

Please fax this form to the Sheraton Crescent Hotel Phoenix at 602-371-2856. To confirm receipt of this form, call _____ (Coaches phone number here).